



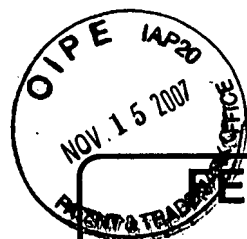
DTU

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/815,239
		Filing Date	March 30, 2004
		First Named Inventor	Ratinder Paul Singh Ahuja
		Art Unit	2131
		Examiner Name	Chen, Shin Hon
Total Number of Pages in This Submission	23	Attorney Docket Number	6897P007

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; min-height: 80px;">Return postcard.</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ryan W. Elliott, Reg. No. 60,156 <b>BLAKELY, SOKOLOFF, TAYLOR &amp; ZAFMAN LLP</b>
Signature	
Date	11/13/07

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Typed or printed name	Carla Vignola
Signature	
Date	11-13-07



# FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ ) 530.00

## Complete if Known

Application Number	10/815,239
Filing Date	March 30, 2004
First Named Inventor	Ratinder Paul Singh Ahuja
Examiner Name	Chen, Shin Hon
Art Unit	2131
Attorney Docket No.	6897P007

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.  
☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
23	2	25.00	\$50.00
5	2	105.00	\$210.00

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202 50	2202 25	Claims in excess of 20
1201 210	2201 105	Independent claims in excess of 3
1203 370	2203 185	Multiple Dependent claim, if not paid
1204 810	2204 405	**Reissue independent claims over original patent
1205 810	2205 405	**Reissue claims in excess of 20 and over original patent

\*\*or number previously paid, if greater, For Reissues, see below

SUBTOTAL (1)

(\$ ) 260.00

### 2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051 130		2051 65		Surcharge - late filing fee or oath
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet.
2053 130		2053 130		Non-English specification
1251 120		2251 60		Extension for reply within first month
1252 460		2252 230		Extension for reply within second month
1253 1,050		2253 525		Extension for reply within third month
1254 1,640		2254 820		Extension for reply within fourth month
1255 2,230		2255 1,115		Extension for reply within fifth month
1401 510		2401 255		Notice of Appeal
1402 510		2402 255		Filing a brief in support of an appeal
1403 1,030		2403 515		Request for oral hearing
1451 1,510		2451 1,510		Petition to institute a public use proceeding
1460 130		2460 130		Petitions to the Commissioner
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)
1806 180		1806 180		Submission of Information Disclosure Stmt
1809 810		1809 405		Filing a submission after final rejection (37 CFR § 1.129(a))
1810 810		2810 405		For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$ ) 270.00

## SUBMITTED BY

Name (Print/Type) Ryan W. Elliott

Registration No.  
(Attorney/Agent)

60,156

Telephone

(408) 720-8300

Signature

*Ryan W. Elliott*

Date

11/13/07